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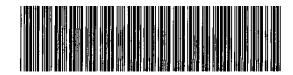
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SECRETARY OF STATE
SECRETARY SEE, FLORID

COVER LETTER

9	TO: Registration Section Division of Corporations				
SUBJECT: Eden Earth Works, LLC					
		ted Liability Compa	iny		
The enclosed Articles	s of Organization and fee(s) are	submitted for filing	,		
Please return all corre	espondence concerning this mat	ter to the following	:		
Kelly Pa	ayne				
		Name of Person			
		Firm/Company			
100 Eas	st Acre Drive				
		Address			
Plantation	n, FL 33317				
Vallyn500		ty/State and Zip Code			
Kellyp300	@gmail.com E-mail address: (to be used	for future annual repo	rt notification)		
For further information	on concerning this matter, pleas	e call:			
Kelly Payne		_at (954)	818-8124		
Nan	Name of Person Area Code & Daytime Telephone Number		& Daytime Telephone Number		
Enclosed is a check	for the following amount:				
\$125.00 Filing Fee	\$130.00 Filing Fee & Certificate of Status	\$155.00 Filin Certified Cop (additional copy	Certificate of Status &		
	Mailing Address Registration Section Division of Corporations P.O. Box 6327 Tallahassee, FL 32314	Registration of Clifton Budget 1 Execution 1	ourier Address on Section of Corporations uilding cutive Center Circle ee, FL 32301		

ARTICLES OF ORGANIZATION FOR FLORIDA LIMITED LIABILITY COMPANY

ARTICLE I - Name:

The name of the Limited Liability Company is:				
Eden Earth Works, LLC				
(Must end with the words "Limited Liability	y Company, "L.L.C.," or "LLC.")			
ARTICLE II - Address: The mailing address and street address of the prin	ncipal office of the Limited Liabil	ity Comp	any i	s:
Principal Office Address:	Mailing Address:			
100 East Acre Drive Plantation, FL 33317	100 East Acre Drive Plantation, FL 33317			
ARTICLE III - Registered Agent, Registered (The Limited Liability Company cannot serve as its own Register business entity with an active Florida registration.) The name and the Florida street address of the registrated Michael Black	red Agent. You must designate an individual	or another	11 OCT 2	
Name		SSE	_	Ī
217 Bayberry Driv	е		¥	
Florida street addre	ess (P.O. Box NOT acceptable)	STA	း မ	
Plantation	_{FL} 33317	AOA	8	
City, State	e, and Zip	_		
Having been named as registered agent and to acliability company at the place designated in the registered agent and agree to act in this capacity. statutes relating to the proper and complete pery accept the obligations of my position as registed. Registered Agent's Signature.	is certificate, I hereby accept the ap I further agree to comply with the formance of my duties, and I am fai ered agent as provided for in Chap	ppointmen provision miliar with	nt as ns of a h ana	all

(CONTINUED)

Page 1 of 2

ARTICLE IV- Manager(s) or Managing Member(s):

The name and address of each Manager or Managing Member is as follows:

Title:	Name and Address:
"MGR" = Manager "MGRM" = Managing Member	
MGRM	Keily Payne
	100 East Acre Drive
	Plantation, FL 33317

(Use attachment if necessary)	
•	
FIGLE V: Effective date, if other than	n the date of filing: (OPTIONAL) ust be specific and cannot be more than five business days prior
in enective date is listed, the date mu r 90 days after the date of filing.)	ist be specific and cannot be more than five business days prior
,	
DECLUDED CICNATUDE	1 /)
REQUIRED SIGNATURE:	$\Lambda\Lambda$ / /
Λ	$\Omega(V_0)$ of Ω
-/-	and the state of t
Signaturé of a me	ember or an authorized representative of a member.
constitutes an affirmation I am aware that any false i	n 608.408(3), Florida Statutes, the execution of this document under the penalties of perjury that the facts stated herein are true. Information submitted in a document to the Department of State (felony as provided for in s.817.155, F.S.)
Kelly Payn	e

Filing Fees:

\$125.00 Filing Fee for Articles of Organization and Designation of Registered Agent
\$ 30.00 Certified Copy (Optional)
\$ 5.00 Certificate of Status (Optional)

Typed or printed name of signee